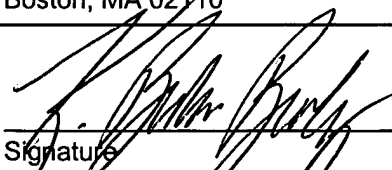


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I hereby certify under 37 CFR 1.10 that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" with sufficient postage on the date indicated above and is addressed to: BOX PATENT APPLICATION, Assistant Commissioner for Patents, Washington, D.C., 20231.	
Sandra E. Marxen Printed name of person mailing correspondence	<i>Sandra E. Marxen</i> Signature of person mailing correspondence

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR §1.53(b)	
Attorney Docket Number	08589/002002
Applicant	DEREK VAN DER KOOY, RODERICK MCINNES, BERNARD CHIASSON, VINCENZO TROPEPE
Title	PHARMACEUTICALS CONTAINING RETINAL STEM CELLS
<b>PRIORITY INFORMATION:</b>	
This application is a divisional of and claims priority from United States patent application 08/937,967, filed September 25, 1997, and U.S. provisional application serial no. 60/026,698, filed September 25, 1996.	
<b>APPLICATION ELEMENTS:</b>	
Cover sheet	1 pages
Specification	29 pages
Claims	1 page
Abstract	1 page
Drawing	3 pages
Combined Declaration and POA, which is: <input type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input checked="" type="checkbox"/> A copy from prior application 08/937,967 and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	3 pages
Statement Deleting Inventors	[**] pages
Sequence Statement	[**] pages
Sequence Listing on Paper	[**] pages
Sequence Listing on Diskette	[**] pages

Small Entity Statement, which is: <input type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input checked="" type="checkbox"/> A copy from prior application 08/937,967 and such small entity status is still proper and desired.	2 pages
Preliminary Amendment	[**] pages
IDS	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] pages
Recordation Form Cover Sheet and Assignment	[**] pages
Assignee's Statement	[**] pages
English Translation	[**] pages
Certified Copy of Priority Document	[**] pages
Return Receipt Postcard	1
<b>FILING FEES:</b>	
Basic Filing Fee: \$380	\$380.00
Excess Claims Fee: 4 - 20 x \$9	\$0.00
Excess Independent Claims Fee: 1 - 3 = 0 x \$39	\$0.00
Multiple Dependent Claims Fee: \$130	\$130.00
Total Fees:	\$510.00
<input checked="" type="checkbox"/> Enclosed is a check for \$510.00 to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges, or any credits, to Deposit Account No. 03-2095.	
<b>CORRESPONDENCE ADDRESS:</b>	
Kristina Bieker-Brady, Ph.D. Reg. No. 39,109 Clark & Elbing LLP 176 Federal Street Boston, MA 02110 Telephone: 617-428-0200 Facsimile: 617-428-7045	
Signature 	Date <u>June 15, 1999</u>